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Bib Data Sheet

CONFIRMATION NO. 2827

<b>SERIAL NUMBER</b> 09/830,101	<b>FILING DATE</b> 03/05/2002 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1615	<b>ATTORNEY DOCKET NO.</b> C1190/20007
<b>APPLICANTS</b> Jean-Marc Zuccarelli, Antibes, FRANCE; Charles Andre Chauveau, Valbonne, FRANCE; <i>MM</i> Gilles DeMichelis, Grasse, FRANCE; Karine Jean, Cagnes Sur Mer, FRANCE;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A 371 OF PCT/FR99/02682 11/03/1999 <i>30 months</i> <i>MM</i>				
<b>** FOREIGN APPLICATIONS *****</b> FRANCE FR 98/14033 11/06/1998 <i>MM</i>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i> Verified and <i>MM</i> Acknowledged <i>MM</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 1
				<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> Caesar Rivise Bernstein Cohen & Pokotilow Seven Penn Center 12th Floor 1635 Market Street Philadelphia, PA 19103-2212				
<b>TITLE</b> Particles coated with granulated crystalline ibuprofen				
<b>FILING FEE RECEIVED</b> 990	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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